


2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000096414 1. Entity Name CUBE HOUSE INCORPORATED	
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FILED
Apr 28, 2004 08:00 AM
Secretary of State

Principal Place of Business 116 GAVILAN AVENUE CORAL GABLES, FL 33143	Mailing Address 116 GAVILAN AVENUE CORAL GABLES, FL 33143
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DO NOT WRITE IN THIS SPACE

02242004 No Chg-P CR2E034 (10/03)
 4. FEI Number **65-0875848** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MARQUEZ, MARGARET
 116 GAVILAN AVENUE
 CORAL GABLES, FL 33143**

**DO NOT WRITE
 IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

000000135051
 04/28/04-80043-025 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MARQUEZ, MARGARET 116 GAVILAN AVENUE CORAL GABLES, FL 33143
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Margaret Marquez* 4/26/04 (305) 582-8033
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #